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14. ABSTRACT Nearly one million Americans suffer found to have CFS. The disease sigmilitary forces. Increasing scientific nervous system (CNS). However, lit brain activities of CFS patients durin pattern in CFS differs from that of heactivity in CFS patients using function motor activity in CFS patients by an different brain regions and between civilian CFS group, a civilian control provide objective information for dia	pnificantly reduces wo evidence suggests that the is known about ho not fatigue and non-fat ealthy controls. Aim 1 onal magnetic resonal alyzing signals of elective brain and muscle group, a GWV CFS of	rk production of civil at CFS is a biological w the CNS is affected igue muscle exercist of the study is to de ance imaging. Aim 2 ctroencephalograms. Measurements wil	lian patients a al illness involuded by CFS. Theses. Our hypotetermine brain is to examine so Aim 3 is to ell be made fror	nd combat ability/readiness of US ving pathology of the central is study will focus on evaluating hesis is that the brain activation activation patterns during motor brain activation patterns during valuate signal relationships among in four groups of participants: a
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#### Introduction

Chronic fatigue syndrome (CFS) is an illness that affects quality of life of both civilian and military populations. However, the diagnosis of CFS is difficult to make because of the absence of specific biomedical markers. Thus, the diagnosis depends primarily on determining whether subjective information provided by the patient meets the clinical case definition of the syndrome. The purpose of this study is to determine whether the central nervous system signals of CFS patients for performing fatigue and non-fatigue motor activities are impaired compared to the signals of healthy volunteers. It is hypothesized that the CNS signals of CFS patients will significantly differ from those of healthy controls. It is expected that at least one or more measurements made by this study will serve as "biological markers" for more objective diagnoses of CFS.

### **BODY**

This report covers the third year of work related to this study. So far, a manuscript based on the results of the analyzed data has been published in the journal of *Clinical Neurophysiology*. A second paper supported by this grant is in press in the journal of *Brain Research*. In addition, A number of studies that were jointly supported by this grant and other awards (mainly from NIH) have been accepted for publication or are already in press. Further analyses of data collected in the past three years are ongoing and more publications are expected in the future. Work that performed in the last year of the project included:

- I. Recruiting and testing research subjects. We have collected data from a total of 58 human subjects. The manuscripts that have published and those to be published soon are based on data collected from these subjects.
- II. Developing data analysis software and performing data analysis. We have developed two software packages for the analysis of electroencephalogram (EEG) and electromyogram (EMG) data. We used these software packages to analysis the collected data and have reported a large portion of the results in the published and in-press manuscripts. Further and more sophisticated data analysis is underway and we anticipate that the new results will lead additional publications. New data analysis include mapping of the electrical signals recorded from the scalp during motor performance using high-density EEG recordings and characterizing differences in frequency modulation and functional connectivity between the brain and muscle in patients and control subjects when they performed motor tasks that induced fatigue.

# KEY RESEARCH ACCOMPLISHMENTS

- I. A number of manuscripts have been published or will be published soon in high-quality clinical and scientific journals (see References).
- II. Eight presentations on the topic of this study have been made at regional, national, and international scientific conferences

# REPORTABLE OUTCOMES

- I. Motor performance of the CFS patients was poorer than the controls.
- II. Relative power of EEG theta frequency band (4-8 Hz) during performing a non-fatigue (NFT) and fatigue (FT) task was significantly greater in the CFS than control group (P < 0.05).
- III. The amplitude of negative potential (NP), a major component of EEG-derived movement-related cortical potential for the combined NFT and FT tasks was higher in the CFS than control group (P < 0.05).

- IV. Within the CFS group, the NP was greater for the FT than NFT task (P < 0.01), whereas no such difference between the two tasks was found in the control group.
- V. Compared to healthy individuals, the EEG source of the CFS patients shifted towards anterior-inferior location of the brain during the fatigue task.
- VI. The source strength was different between the CFS and control groups during both the fatigue and non-fatigue tasks.
- VII. Developed methods to quantify physiological connection (signal coherence) between the brain and muscle.
- VIII. Developed methods to quantify brain white matter structures.

# **CONCLUSIONS**

The results show that chronic fatigue syndrome involves altered central nervous system signals in controlling voluntary muscle activities, especially when the activities induce fatigue. Physical activity-induced EEG signal changes may serve as biological/physiological markers for more objective diagnosis of CFS.

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